



2653/4

PTO/SB/21 (05-03)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/560,122	
	Filing Date	April 28, 2000	
	First Named Inventor	Too Yew TENG	
	Art Unit	2653	
	Examiner Name	B. Vuong	
Total Number of Pages in This Submission	5	Attorney Docket Number	2117-00100

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  PTO 1449 (1 p.), and 5 References
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	SHANNON W. BATES
Signature	Shannon W. Bates
Date	August 20, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	M. A. CRABTREE		
Signature	M. A. Crabtree	Date	August 20, 2003

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# FEE TRANSMITTAL For FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** \$ 180.00

## Complete if Known

Application Number 09/560,122

Filing Date April 28, 2000

First Named Inventor Too Yew TENG

Examiner Name B. Vuong

Art Unit 2653

Attorney Docket No. 2117-00100

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## METHOD OF PAYMENT (Check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 03-2769

Deposit Account Name: Conley Rose, P.C.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

☒ Credit any overpayments

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)				
1001 750	2001 375			Utility filing fee	\$
1002 330	2002 165			Design filing fee	\$
1003 520	2003 260			Plant filing fee	\$
1004 750	2004 375			Reissue filing fee	\$
1005 160	2005 80			Provisional filing fee	\$

**SUBTOTAL (1) \$00.00**

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	*	20** = * x		18.00 = \$
Independent Claims	*	3** = * x		84.00 = \$
Multiple Dependent				280.00 = \$00.00

Large Entity	Small Entity	Fee	Fee	Fee Description
Code (\$)	Code (\$)			
1202 18	2202 9			Claims in excess of 20
1201 84	2201 42			Independent Claims in excess of 3
1203 280	2203 140			Multiple dependent claim, if not paid
1204 84	2204 42			** Reissue independent claims over original patent
1205 18	2205 9			** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) \$00.00**

\*\* or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)				
1051 130	2051 65			Surcharge - late filing fee or oath	\$
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	\$
1053 130	1053 130			Non-English specification	\$
1812 2,520	1812 2,520			For filing a request for <i>ex parte</i> reexamination	\$
18042 920*	1804 920*			Requesting publication of SIR prior to Examiner action	\$
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	\$
1251 110	2251 55			Extension for reply within first month	\$
1252 410	2252 205			Extension for reply within second month	\$
1253 930	2253 465			Extension for reply within third month	\$
1254 1,450	2254 725			Extension for reply within fourth month	\$
1255 1,970	2255 985			Extension for reply within fifth month	\$
1401 320	2401 160			Notice of Appeal	\$
1402 320	2402 160			Filing a brief in support of an appeal	\$
1403 280	2403 140			Request for oral hearing	\$
1451 1,510	1452 1,510			Petition to institute a public use proceeding	\$
1452 110	2452 55			Petition to revive - unavoidable	\$
1453 1,300	2453 650			Petition to revive - unintentional	\$
1501 1,300	2501 650			Utility issue fee (or reissue)	\$
1502 470	2502 235			Design issue fee	\$
1503 630	2503 315			Plant issue fee	\$
1460 130	1460 130			Petitions to the Commissioner	\$
1807 50	1806 50			Processing fee under 37 CFR 1.17(g)	\$
123 50	123 50			Petitions related to provisional applications	\$
1806 180	1806 180			Submission of Information Disclosure Stmt	\$180.00
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	\$
1809 750	2809 375			Filing a submission after final rejection (37 CFR § 1.129(a))	\$
1810 750	2810 375			For each additional invention to be examined (37 CFR § 1.129(b))	\$
1801 750	2801 375			Request for Continued Examination (RCE)	\$
1802 900	1802 900			Request for expedited examination of a design application	\$

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$180.00**

## SUBMITTED BY

Name (Print/Type)

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Shannon Warren Bates

Date

August 20, 2003

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